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**FACSIMILE COVER SHEET**

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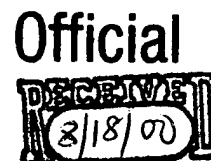
TIME:

OUR REFERENCE: 175483

FROM: Y. KURT CHANG  
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TO: EXAMINER PAUL E. CALLAHAN  
GROUP 2767  
UNITED STATES PATENT AND TRADEMARK OFFICE  
WASHINGTON, D.C.



TELEPHONE NUMBER: 703-305-1336  
FACSIMILE NUMBER: 703-308-9051

IN RE APPLN. OF: FELDBAU ET AL.  
APPLICATION NO. 08/981,461  
FILED: DECEMBER 23, 1997  
FOR: APPARATUS AND METHOD FOR AUTHENTICATING THE DISPATCH AND  
CONTENTS OF DOCUMENTS  
GROUP ART UNIT: 2767  
EXAMINER: PAUL E. CALLAHAN

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FAXPTO (6/29/2000)

In re Application of: Feldbau et al.  
Application No. 08/981,461  
Filed: 12/23/97  
For: Apparatus and Method for Authenticating the Dispatch and Contents of Documents

COMMISSIONER OF PATENTS AND TRADEMARKS  
Washington, D.C. 20231



Sir:

Transmitted herewith is a response to an office action in the subject application.

- ☒ Small entity status of this application under 37 C.F.R. §§ 1.9 and 1.27 has been established by a verified statement previously submitted.
- ☐ A verified statement to establish small entity status under 37 C.F.R. §§ 1.9 and 1.27 is enclosed.
- ☒ Petition For Extension Of Time
- ☐ Applicant(s) petitions for a one-month extension of time under 37 C.F.R. § 1.136, the fee for which is \$55.00.
- ☒ Applicant(s) believes that no petition for an extension of time is necessary. However, to the extent that such petition is deemed necessary, applicant(s) hereby petition for a sufficient extension of time to render the present submission timely. Please charge Deposit Account No. 12-1216 for the appropriate petition fee.
- ☒ No additional claim fee is required.
- ☐ Other:

The claim fee has been calculated as shown below:

					SMALL ENTITY		OTHER THAN A SMALL ENTITY	
	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	EXTRA CLAIMS PRESENT	RATE	ADDIT. CLAIM FEE	RATE	ADDIT. CLAIM FEE
TOTAL	89	MINUS	113	0	x 9=	0	x 18=	0
INDEPENDENT	5	MINUS	8	0	x 39=	0	x 78=	0
<input type="checkbox"/>	FIRST PRESENTATION OF MULTIPLE CLAIM				+ 130=	\$	+ 260=	0
					TOTAL	\$	TOTAL	0

- ☐ Please charge my Deposit Account No. 12-1216 in the amount of \$..... A duplicate copy of this sheet is attached.
- ☐ A check in the amount of \$ is attached.
- ☒ The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 12-1216. A duplicate copy of this sheet is attached.
- ☒ Any filing fees under 37 C.F.R. § 1.16 for the presentation of extra claims.
- ☒ Any patent application processing fees under 37 C.F.R. § 1.17.

Respectfully submitted,

LEYDIG, VOIT & MAYER, LTD.

By Yeh Chang  
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